

IPW

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA , 22313-1450 on 24 May 2006
Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara
(Signature of Person Mailing Paper or Fee)



PATENT APPLICATION
Attorney Docket No. OR03-10201

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF

Vipin Samar

Serial No. 10/645,953

Filing Date: 22 August 2003

Title: METHOD AND APPARATUS FOR
PROTECTING PRIVATE INFORMATION
WITHIN A DATABASE

)
) Examiner: Rose, Helene Roberta
)
) Group Art Unit: 2163
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AMENDMENT TRANSMITTAL LETTER

Mail Stop: Non-Fee Amendment
Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ Response under 37 C.F.R. § 1.111 to official action mailed **24 February 2006**.
- ☐ A petition for extension of time is also enclosed with a fee of **\$55.00** for a one-month extension for a small entity.
- ☐ Terminal disclaimer under 37 C.F. R. § 1.321(c), including
 - ☐ check for \$130.00 fee under 37 C.F.R. § 1.20(d), and
 - ☐ 2 certificates under 37 C.F.R. § 3.73(b).
- ☐ Information disclosure statement, form 1449 and ___ references.
- ☒ No additional claims fees are required.

☐ An additional fee is required, and is calculated as shown below:

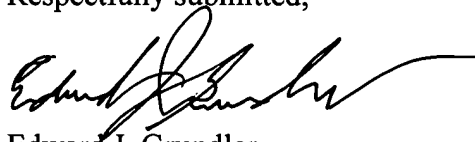
AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

- ☐ A check in the amount of \$___ is enclosed.
- ☐ Charge \$___ to Deposit Account No. ___ (Docket No. ___).
- ☒ Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. OR03-10201).

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Respectfully submitted,

By



Edward J. Grundler
Registration No. 47,615

Date: 24 May 2006



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Application Number : 10/645,953
Applicant : Vipin Samar
Filed : 22 August 2003
TC/A.U. : 2163
Examiner : Rose, Helene Roberta

Confirmation Number: 8253

Docket Number : OR03-10201
Customer No. : 51,067

M/S: Box Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of **24 February 2006**, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

An **Appendix** including an amended information disclosure statement is attached following page 10 of this paper.